lease type a plus sign inside th	nis box ± PT	O/SB/01 (12/97)	App	roved for use thr	ough 09/30/00,	OMB 0651-00	32 +			
DECLARATION	ON FOR U DESIGN	TILITY OR	Attorney Dock	et Number	37505.0313					
PATENT	First Named Inventor Palazzo et al.									
(37	COMPLETE IF KNOWN									
				Application No	umber					
DeclarationSubmitted OR		eclaration ubmitted after Initia								
with Initial Filing		ling (surcharge 7 CFR 1.16(e))		Group Art Uni	t					
	ге	quired)		Examiner Nam	ne					
As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
Electrochemical Treatment Method To Reduce Voltage Delay And Cell Resistance In Lithium/Silver Vanadium Oxide Cells										
the specification of which		(Title o	f the Inv	vention)						
is attached hereto OR										
was filed on (MM/DD/YYYY) as United States Application Number or PCT International										
Application Number and was amended on (MM/DD/YYYY) (if applicable).										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application (Numbers)			Foreign Filing				Certified Copy Attached? YES NO			
	A			10	o o	0 0	0 0 0			
☐ Additional foreign application	ation numbers	are listed on a supp	lementa	l priority data sh	eet PTO/SB/02	B attached hereto.				
I hereby claim the benefit und	ler 35 U.S.C.	19(e) of any United	l States	provisional appl	ication(s) listed	below.				
Application Number	er(s)	Filing Date	e (MM/	DD/YYYY)						
60/441,986		January 23, 2003		numbers are listed on a supplementary data sheet PTO/SB/02B			pplemental			

	DEC	LARA	TION -	Utility o	r Design	Patent .	Applicat	tion		
designating disclosed i acknowled	aim the benefit under 3 g the United States of A n the prior United State ge the duty to disclose the filing date of the prior	merica, la sor PCT information	isted below a International on which is n	nd, insofar a application naterial to p	is the subject in the manr atentability	et matter of e ner provided as defined in	ach of the cl by the first p 37 CFR 1.5	laims of paragra 6 whic	f this application is not ph of 35 U.S.C. 112, I h became available	
U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)		
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	nal U.S. or PCT internation									
	d inventor, I hereby appand Trademark Office of			istered prac	titioner(s) to	prosecute th	nis application	on and t	to transact all business in	
☐ Customer Number OR Registered practitioner's name/registration number listed bel					\rightarrow			F	Place Customer Number Bar Code Label Here	
Name Registration N				ion No.	Name				Registration No.	
Michael F. Scalise 34,920										
	nal registered practitioner	(s) named	on supplement	tal Registered	Practitioner	Information s	heet PTO/SB/	02C atta	ached hereto	
Direct all correspondence to: ■ Customer Number or Bar Code Label				33751	OR Correspondence address below			nce address below		
Name	Michael F. Scalise				رــــــــــــــــــــــــــــــــــــ		•			
Address	s Wilson Greatbatch Technologies, Inc.									
Address	10,000 Wehrle Drive			_						
City	Clarence		State New York		ZIP	140	14031			
Country	United States Telephone ·			(716) 759-5810			Fax	(71	6) 759-5074	
are believe made are p	eclare that all statement od to be true; and furthe nunishable by fine or im the application or any p	r that thes prisonme	e statements nt, or both, u	were made	with the kno	wledge that	willful false	statem	ents and the like so	
Name of Sole or First Inventor:				□ A peti	□ A petition has been filed for this unsigned inventor					
	Given Name (first a	nd middle	e [if any])		Family Name or Surname					
Marcus Pa	lazzo									

New York

New York

State

State

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

1/12/04

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Date

Citizenship

Country

USA

14120

Country

ZIP

Inventor's

Signature

City

Residence: City

Post Office Address
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259 Stenzil Avenue, Apt. C-4

North Tonawanda

North Tonawanda

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if any:		☐ A petition has been filed for this unsigned inventor							
Given Nar	ne (first and middle [if a	ny]) Family Name or Surname							
Esther S.		Takeuchi							
Inventor's Signature	Egh	50	کین		~``		Date	16 Janoy	
Residence: City	East Amherst	State	New Y	ork	Country	USA	Citizenship	USA	
Post Office Address									
Post Office Address	38 San Rafael Court								
City	East Amherst	State	New Y	ork	ZIP	14051	Country	USA	
Name of Additional Jo	☐ A petition has been filed for this unsigned inventor								
Given Nar	ny]) Family Name or Sur						4		
Randolph									
Inventor's Signature	Kandolph G. Lei				G		Date	1115/04	
Residence: City	Williamsville	State	State New Yo		Country	USA	Citizenship	USA	
Post Office Address									
Post Office Address	35 Edward Street	_					-		
City	Williamsville	State	New Y	ork	ZIP	14221	Country	USA	
Name of Additional Jo	☐ A petition has been filed for this unsigned inventor								
Given Nar	any]) Family Name					or Surname			
Inventor's Signature							Date		
Residence: City		State			Country		Citizenship		
Post Office Address									
Post Office Address	-								
City	State				ZIP		Country		